## 2030982395

FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2012 DEC 18

FEC Office Use ON 11:53

	L					FFC	Office Use Office	11:50
NAME OF COMMITTEE (in f		R PRINT W		mple: If typin r the lines.	g, type	12FE4M5	FAIL CEN	TER
LGP, AT MIDINI	TI PACI	(IGPAY PA	44) _					<u> </u>
			111	1 1 1 1	1 1 1 1			
ADDRESS (number and	-	50, S0,U	74,	7PQ E	ASI	<del></del>	1 1 1 1 1	
Check if diffe	rent	TE, BOL						
than previous reported. (AC	ic) [SAN	TI 4AKE	F1917	X	ا لب		84,197	
2. FEC IDENTIFICA	TION NUMBER	<b>V</b> (	OTY ▲		S	TATE 🛦 .	ZIP CC	DDE 🛦 ·
COOUE	675)	3.	IS THIS REPORT	- 4	IEW N) OR	AME (A)	ENDED	
July 15 Quarterly October Quarterly January Year-End	erts:  Report (Q1) (c) Report (Q2) 15 Report (Q3) 31 Report (YE) Mid-Year Non-election (d	eport	ction on	Primary (12P	12C) [	Sep 2	2S) in the State	141 1 [ 1]
Terminati (TER)	on Report	•	ction on	[ <b>M</b> ]/	ا ﴿ الْحَالَ	_^	in the State	11 1)
5. Covering Period		متما التمتم	12	through		' [[]]'	2012	
Type or Print Name of Treasurer  Type or Print Name of Treasurer  Type or Print Name of Treasurer								
Signature of Treasure		Se	N	26	D	ate IO	<b>' 2'5</b> '	2012
NOTE: Submission of f	alse, erroneous, or	incomplete informa	ation may s	ubject the per	son signing th	is Report to th	e penalties of 2	U.S.C. §437g.
Office Use							FEC FO	

Only

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand January 1. (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Linea 6(a) and 6(c) for Column B)..... Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

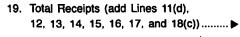
Federal Election Commission 999 E Street, NW Washington, DC 20463

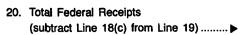
Toll Free 800-424-9530 Local 202-694-1100

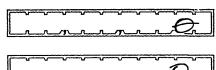
# 12030982397

#### **DETAILED SUMMARY PAGE**

l.	FEC Form 3X (Rev. 06/2004)	of Receipts	Page 3
\A/-	ite or Type Committee Name		, ago <b>o</b>
VVI		12 4 1 1 1 2 6 )	
	Graymont PAC CG	KAYPAL)	
Re	port Covering the Period: From:	01 2012	To: 10 / 17 / 2012
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		·
	Than Political Committees		171600
	(i) Itemized (use Schedule A)	Lange and the second	Lander Lander
	(ii) Unitemized	A	A
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	0	17.16.00
	(b) Political Party Committees	Langer	
	(c) Other Political Committees		
	(such as PACs)	Langer	Lange
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	4	171600
12	Totals to Line 33, page 5)  Transfers From Affiliated/Other		
	Party Committees	A	<b>A</b>
13.	All Loans Received		1 1 1 1 1 1 1 1
14.	Loan Repayments Received	2	
	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)		Lange of the same
16.	Refunds at Contributions Made		
	to Federal Candidates and Other		
17	Political Committees Other Federal Receipts	Lanarata	Lranana eta
17.	(Dividends, Interest, etc.)		
18.	Transfers from Non-Federal and Levin Funds		
~	(a) Non-Federal Account		
	(from Schedule H3)		
	(b) Levin Funds (from Schedule H5)		
	(c) Total Transfers (add 18(a) and 18(b))		







 rhola	1600
 77	1600

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo I Grida	Calcital Tear-to-Date
	Activity (from Schedule H4)		A
	(i) Federal Share		
	(ii) Non-Federal Share		
	(b) Other Federal Operating  Expenditures	-0	6
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	6	0
22.	Transfers to Affiliated/Other Party		
23.	CommitteesContributions to	Landana	Language
	Federal Candidates/Committees and Other Political Committees		300000
24.	Independent Expenditures		
25.	(use Schedule E)	- nonnata	Lanana Can
	(2 U.S.C. §441a(d)) (use Schedule F)	0	0
<b>26</b> .	Loan Repayments Made	<u> </u>	Lining
27.	Loans Made	<b>A</b>	<del>D</del>
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	Lining	Lange to
	(b) Political Party Committees	<b>6</b>	
	(c) Other Political Committees		
	(such as PACs)		
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	D-	A
	(400 21100 20(4), (0), 4114 (0),		
29.	Other Disbursements	Lander Or	Larranton
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share	Lancara	L. T. T. T. T. O.
	(ii) "Levin" Share		Lanara On
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		Lange of the second
	(c) Total Faderal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	Lanara And	
31.	Total Disbursements (add Lines 21(c), 22,		[ <del></del>
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	Lanna Or	3,0,0,000
32	. Total Federal Disbursements		
<b>J</b> _,	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	3	300000
	•		

FEC Form 3X (Rev. 02/2003)

#### **DETAILED SUMMARY PAGE**

of Disbursements

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)		171600
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		1,7,1,6,00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶		
37. Offsets to Operating Expenditures (fram Line 15, page 3)	Lanzan D.	
38. Nat Operating Expenditures (subtract Line 37 from Line 36)		

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the 11a 12 11c **Detailed Suramary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Full Name (Last, First, Date of Receipt Mailing Address City Zip Code State Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-te-Date ▼ **Primary** General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt **Mailing Address** City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ General **Primary** Other (specify) Full Name (Last, First, Middle Initial) C. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Occupation Name of Employer Receipt For: Aggregate Year-to-Date ▼ **Primary** General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)......

				·	
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b			26 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME DF COMMITTEE (In Full)	nents may not be sold or use ne and address of any politica	ed by any personal committee to	on for the purpose of so solicit contributions from	oliciting contributions m such committee.	
Full Name (Last, First, Middle Initial)  A. Nove for this reporting	Svay pac)		Date of Disbursemer		
Nove for this reporting Mailing Address	g period		MTW / TOTO	\ \[ \bullet \ \frac{1}{2} \\ \tag{4.4} \\ \	
City Purpose of Disbursement	State Zip Code		Amount of Each Dis	bursement this Period	
Candidate Name  Office Sought: House Disburser	nent For:	Category/ Type			
Senate President State: District:	Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial)  B.  Mailing Address			Date of Disbursemen	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Mailing Address  City	State Zip Code				
Purpose of Disbursement  Candidate Name		Category/ Type	Amount of Each Dis	bursement this Period	
Office Soughf: House Disburser  Senate President  State: District:	ment For: Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial)	<del> </del>		Date of Disburseme	nt	_

State

Disbursement For:

Primary

Other (specify)

Zip Code

General

Category/ Type

SUBTOTAL of Disbursements This Page (optional)	L. n. n. n. n. t.
TOTAL This Period (last page this line number only)	

Amount of Each Disbursement this Period

Mailing Address

Candidate Name

Office Sought:

State:

Purpose of Disbursement

House

Senate

District:

President

City

SCHEDULE C (FEC Form 3X)		
OANS	Use separate schedule(s)	
	for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full)		
EXYMONT PAC (GYAY PAC)  LOAN SOURCE Full Name (Last, First, Middle Initial)		Election:
	il	Primary
None for reporting penal		General
Mailing Address	[	Other (specify) ▼
City State ZIP Co	nde	
Original Amount of Loan Cumulative Payment To		ce Outstanding at Close of This Period
Language Language		
TERMS Date Incurred Date Due	Interest Rate	Secured:
المرسا المرمرين المرمرين المرسا المربون المرسا		<u></u>
	<u></u>	% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source		
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
		-
Car	Amount	<u> </u>
City State ZIP Code	Guaranteed Outstanding:	<u></u>
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
Mailing Address	Occupation	
	Amount [	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
City State ZIP Code	Guaranteed Outstanding:	<u></u>
3. Full Name (Last, First, Middle Initial)	Name of Employer	
, and the second second		
Mailing Address	Occupation	
	Amazint	
City State ZIP Code	Amount Guaranteed	VVVVVV
	Outstanding:	
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed	~~~~~~~~~~ <u>~~~~~</u>
City State ZIP Code	Guaranteed Outstanding:	<u></u>
_1	1	
OUDTOTAL O THE DATE OF THE DAT	_	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
SUBTOTALS This Period This Page (optional)	<u> </u>	
TOTALS This Period (last page in this line only)	<b>&gt;</b>	

## SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page \_\_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463				
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER		
Graymont PAC COPAY PA	40)	C10,048675		
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)		
Full Name				
None		<u></u> %		
Mailing Address	Date Incurred or Established			
City State Zip Code	Date Due			
A. Has loan been restructured? No Yes	If yes, date originally incurred	/ 200 / 707777		
B. If line of credit,	Total			
Amount of this Draw:	Outstanding Balance:			
C. Are other parties secondarily liable for the debt incurre	od? st be reported on Schedule C.)	-		
D. Are any of the following pledged as collateral for the le		Vhat is the value of this collateral?		
property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	deposit, shattel papers,			
No Yes If yes, specify:				
		Does the lender have a perfected security named in it? No Yes		
E. Are any future contributions or future receipts of intere collateral for the loan? No Yes If yes, s		What is the estimated value?		
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:			
Date account established:	Address:			
Date account established.				
	City, State, Zip:			
F. If neither of the types of collateral described above was the loan amount, state the basis upon which this loan				
G. COMMITTEE TREASURER		DATE		
Typed Name				
Signature				
H. Attach a signed copy of the loan agreement.				
<ul> <li>I. TO BE SIGNED BY THE LENDING INSTITUTION:</li> <li>I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.</li> </ul>				
<ol> <li>The loan was made on terms and conditions (in- similar extensions of credit to other borrowers of</li> </ol>	comparable credit worthiness.	·		
III. This institution is aware of the requirement that a complied with the requiremente set forth at 11 C	a loan must be made on a basis FR 100.82 and 100.142 in makin	which assures repayment, and has g this loan.		
AUTHORIZED REPRESENTATIVE		DATE		
Typed Name		الممصمحيا ، المعما ، المصما		
Signature	(Ie			

SCHEDULE D (FEC Form 3X)	(Use separate PAGE	OF _
DEBTS AND OBLIGATIONS	schedule(s) FOR LINE NUMBER:	
Excluding Loans	for each (check only one) numbered line)	9
NAME OF COMMITTEE (In Full)		
GRAYMONT PAC (GRAYPAC)		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):	
None		
Mailing Address		
City State Zip Code		
Outstanding Release Register This Regist		
Outstanding Balance Beginning This Period		
Armount Incurred This Period Payment This	Period Outstanding Balance at Close of Ti	
Language Language		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):	
b. Full Harris (2005, Files, Missais Hillary of Bobbi of Greens	reading of post (Fulpodo).	
Marillania Additional		
Mailing Address		
City State Zip Code		
Outstanding Balance Beginning This Period		
Amount Incurred This Period Payment This		
		الــــــــــــــــــــــــــــــــــــ
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):	
Mailing Address		
City State Zip Co	de	
,	•	
Outstanding Balance Beginning This Period		
Amount Incurred This Period Payment This	Period Outstanding Balance at Close of T	his Period
		~ ~
		~~~ <u>~</u>
		~~~
1) SUBTOTALS This Period This Page (optional)		
2) TOTALS This Period (last page this line number only)		لسميم
		~~~
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)		~~~ <u>~</u>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (	ast page only) ▶	

### **Federal Election Commission** ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered **Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified 11/14/14 **Postmarked USPS** Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 12/18/16